

Work Order ID 90602

September-20-12 11:12:56 AM

90602

Page 1

Item ID: D350-604-041

Accept

N900040100

Setup Start *NS1*

Revision ID:

Item Name: Rear Locker Extender

Stop *NS2*

Start Date: 20/09/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 04/10/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: ML5 Date: 12-09-20

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2273	F								
D350-604-041	B								

100

100

DC

Document Control

DOCUMENT CONTROL

Memo

Photocopy bluefile and create labels per PPP D350-604-041
CHG004

0.00

0.00

[Handwritten signature and date 12/11/19]

ML5 12-11-19

110

110

Purchasing

Purchasing

PURCHASING

Memo

Issue P/O: 17976
Description: D350-604-041 Rear locker extender.
Supplier: Delastek.
Certification of Conformity and process sheet from Delastek is required.

0.00

0.00

CL 12/09/21 ①

Pto →

4 x 2600-6 Camlock stud - Ship to Delastek B _____
4 x 2600-LW Retaining washers - Ship to Delastek B _____

091

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: *[Signature]* Date: *12/11/24*

QA Closed: *[Signature]* Date: *11*

Work Order: <u>90602</u>	DISPOSITION Rework <input checked="" type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. <u>D350-604-041</u>		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. <u>12-2071</u>		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									
	<i>12/11/24</i>	<i># 110</i>	<i>41</i>	<i>Found at inspection that the Rear Buckles are very rough on the outside and the Primers is not adhering / Flaking off. (see pic's attached)</i>	<i>DAS 16 9-83</i> <i>Q52042</i> <i>12/11/24</i>	<i>→ Remove all Primer + Sand lightly to smooth out finish AND Re-Prime as per Q52007</i> <i>Inform solve of issue. See Attached Email</i>	<i>AT</i> <i>12-11-14</i>	<i>DAS 16 9-83</i> <i>12/11/24</i>	<i>DAS 16 9-83</i> <i>Q52042</i> <i>12/11/24</i>

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input checked="" type="checkbox"/> Other <i>not strong enough / Proper enough by supplier</i>	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled
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Work Order ID 90602

September-20-12 11:12:56 AM

90602

Page 2

Item ID: D350-604-041

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Rear Locker Extender

Start Date: 20/09/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 04/10/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

Receive & Inspect for Damage & Mat'l Certs
Packaging

0.00

120

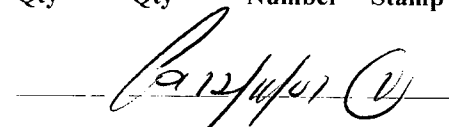
Packaging

Memo

0.00

Packaging

Ensure a copy of Certification of Conformity and process sheet from Delastek is attached.



130

QC5- Inspect part completeness to step on W/O

0.00

130

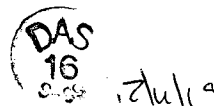
QC

Memo

0.00

Quality Control

Check hole locations to template. DT 8824 Check process sheet and audit.



140

0.00

140

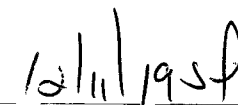
Small Fab

Memo

0.00

Small Fab

INSTALL DECALS AS PER DWG



NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 90602

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90602

Page 3

Item ID: D350-604-041

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Rear Locker Extender

Start Date: 20/09/2012 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 04/10/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150 *150* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00 0.00				1			
160 *160* Packaging Packaging	Packaging Memo Identify and pack for shipping as per PPP D350-604-041 Location: <u>50</u> PPP Rev: <u>I</u>	0.00 0.00							
170 *170* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00							

12 12/11/20

12/11/20

MF
12-11-20

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

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Page 1

Work Order ID: 90602

90602

Parent Item: D350-604-041

D350-604-041

Parent Item Name: Rear Locker Extender

Start Date: 20/09/2012

Required Date: 04/10/2012

Start Qty: 1.00

Required Qty: 1.00

Comments:

IPP Rev:Q03.12.01ReformatKJ/RF

IPP REV:R

12.02.07 AS PER ECN12-521 DD verf:JLM

IPP REV:S 12.04.04

AS PER DWG REV.B DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2728-1 *D2728-1* Dart Logo label		Manufactured	No				Each	0.0000	**	1		SP	
D2729-1 *D2729-1* Dart Logo label		Manufactured	No				Each	0.0000	**	1		SP	
2600-6 *2600-6* Camlock Stud		Purchased	No			110	Each	473.0000	4	4		02/12/09/21	

Location

Loc Qty

Loc Code

396	37
122763	37
ST380	236
120077	8
121287	32
121556	4
122317	6
122335	6
122441	180
ST396	200
122973	200

4
4

AS 12-11-19 (supplementary)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

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Page 2

Work Order ID: 90602

Parent Item: D350-604-041

Parent Item Name: Rear Locker Extender

90602

D350-604-041

Start Date: 20/09/2012

Required Date: 04/10/2012

Start Qty: 1.00

Required Qty: 1.00

2600-LW

Purchased

No

110

Each

528.0000

4

4

2600-1 W

Camloc Retaining Washer

**

CL 12/09/21

Location

Loc Qty

Loc Code

380

180

122452

180

ST380

148

122317

148

ST396

200

122973

200

D350-604-041P

Purchased

No

110

Each

3.0000

1

1

D350-604-041P

Rear Locker Extender

**

AS 12-11-19 (supplementary)

90602 SP

Location

Loc Qty

Loc Code

CA

2

88868

1

88877

1

ST

1

74041

0

87197

1

D2268

Manufactured

No

140

Each

41.0000

1

1

D2268

Decal

**

12/11/19

Location

Loc Qty

Loc Code

ST008

41

69592

2

78908

1

80010

13

86752

11

88883

14

PTG
50

NCR: Yes / No

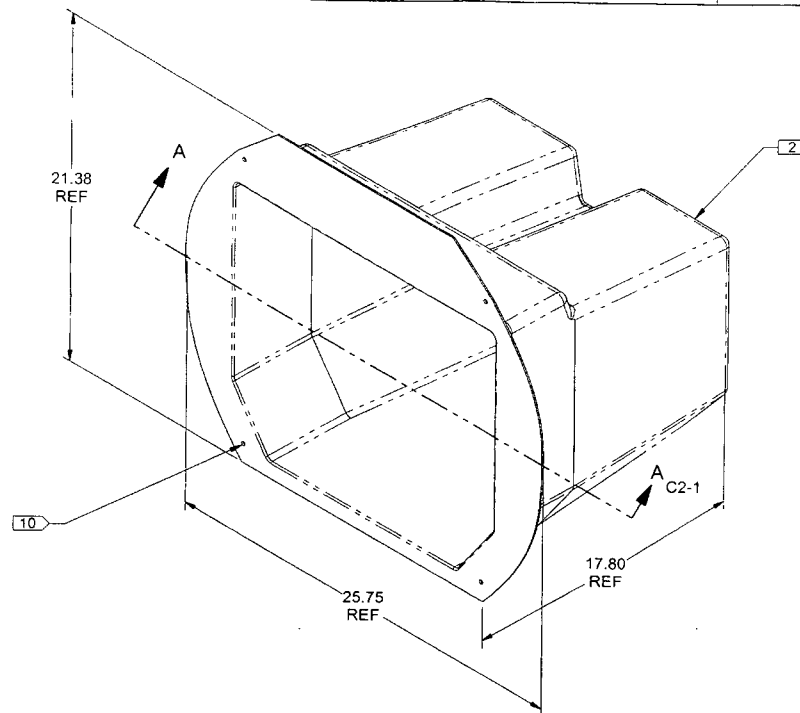
WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

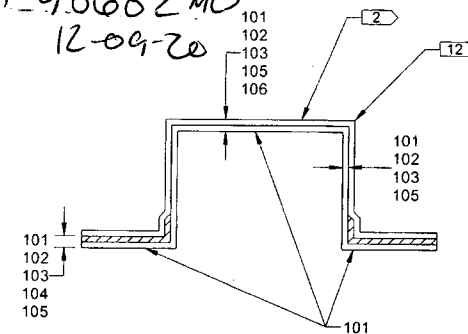
QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data				<div style="font-size: 2em;">88882</div> <div style="font-size: 1.5em;">mcc</div>	<div style="font-size: 1.5em;">12/11/19</div> <div style="font-size: 2em;">SP</div>						
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	



SHOP COPY
 REFERENCE
 UNCONTAINED
 SUBJECT
 WORK COPY
 NO. 90602 MS
 12-09-20



D2273 REAR LOCKER EXTENDER

NOTES (OPTION A):

- 1) MATERIALS:
 RESIN: DERAKANE 470-36/411/510A40
 FIBRE: 9 oz = 9.7 oz 7781 WEAVE "S" GLASS
 18 oz = 18.0 oz ROVING "E" GLASS
- 2) FINISH: FINISH THIS SURFACE WITH DUPONT GREY PRIMER
 LE 3404-S/LE 1175-S
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 7.75 lbs NOMINAL, 10.0 lbs MAXIMUM
- 8) LAMINATE PER DART QSI 006
 LAMINATION SCHEDULE PER THIS DRAWING
- 9) LAYUP USING DT8010 MOLD. WET LAYUP NO BAG/VACCUUM
- 10) TRIM & DRILL PER DT8020. OPEN HOLES TO Ø0.257 (4 PLACES)
- 11) CONSTRUCTION:
 101-WHITE GLOSS GELCOAT # GEL 2330PAWK745 TO MIN
 THICKNESS OF 0.020, MAX THICKNESS OF 0.040
 102-9 oz ALL OVER
 103-18 oz ALL OVER
 104-18 oz REINFORCE FRONT FLANGE EXTENDING 2" ON SIDES
 105-9 oz ALL OVER
 106-PEEL PLY
- 12) MATTE TO HOLD DOWN CORNERS AS REQUIRED

NOTES (OPTION B):

- 1) MATERIALS:
 RESIN: HETRON FR 650 T-20
 FIBRE: 1.5 oz RANDOM FIBERGLASS MAT
 CATALYST: CADOX M-50A
- 2) FINISH: FINISH THIS SURFACE WITH DUPONT GREY PRIMER
 LE 3404-S/LE 1175-S
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 8.5 lbs NOMINAL, 10.0 lbs MAXIMUM
- 8) LAMINATE PER THIS DRAWING
- 9) LAYUP USING DT8010 MOLD. WET LAYUP NO BAG/VACCUUM
- 10) TRIM & DRILL PER DT8020. OPEN HOLES TO Ø0.257 (4 PLACES)
- 11) CONSTRUCTION:
 101-WHITE GLOSS GELCOAT # G730AA1100 TO MIN
 THICKNESS OF 0.020, MAX THICKNESS OF 0.040
 102-1.5 oz RANDOM FIBERGLASS MAT
 103-N/A
 104-N/A
 105-1.5 oz RANDOM FIBERGLASS MAT
 106-N/A
- 12) N/A
- 13) CATALYZE GELCOAT AND RESIN @ 1.5% CADOX M-50A

RELEASED
 2012-08-22

G	ADD MANUFACTURING OPTION B, ZN B5-1	DC	12.08.08
F	PRIMER LE 3404-S/LE 1175-S WAS 1144-S, ZN A6-1	DC	12.02.27
E	CHANGED SURFACE FINISH FROM 944W005 GELCOAT TO 2330PAWK745 GELCOAT, ZN A7-1. UPDATED DWG TO CURRENT STANDARDS.	DC	12.02.02
D	REMOVE EPOCAST, ADD SURFACE FINISH	CP	02.04.01
C	CLARIFY MATERIAL, LAYUP, AND TOOLING	RF	02.01.30
B	RE-DRAWN	MM	96.05.27
REV.	DESCRIPTION	BY	DATE
DESIGN	JB	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	DC		
CHECKED	RF	DRAWING NO.	REV. G
MFG. APPR.	DC	D2273	SHEET 1 OF 1
APPROVED	RF	TITLE	SCALE
DE APPR.	RF	350 REAR LOCKER EXTENDER NTS	
DATE	12.08.08	COPYRIGHT © 1996 BY DART AEROSPACE LTD THIS DOCUMENT IS PRELIMINARY AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR DRAWING TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Solve Composites

29 Distribution Way
Suite 101
Plattsburgh, NY 12901
Phone: 518-324-3838
Fax: 518-324-5530

Packing List

Bill Dart Aerospace

To: 1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada

Ship Dart Aerospace

To: 1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada

Shipment No: 13671

Shipment Date: 10/26/12

Ship Via: Fedex Freight

Order Number: 12043

Order Date: 09/21/12

Customer Code: DART

Phone: (613) 632-9577

PO Number: 17976

Terms: Net 30 Days

Quantity						Unit	Description	Revision	Job Number
Item	Open	Shipped	Back Ord	Canceled					
1	1	1	0			EA	D350-604-041P D350-604-041P Rear Locker Extender	F	12043-01
2	1	1	0			EA	D350-604-041P D350-604-041P Rear Locker Extender	F	12043-02
3	1	1	0			EA	D350-604-041P D350-604-041P Rear Locker Extender	F	12043-03
10	1	1	0			EA	D350-604-041P D350-604-041P Rear Locker Extender	F	12043-10

Packing Clerk's Initials
Solve Composites

Received In Good Order By
Dart Aerospace



Certificate of Conformance

Solve Composites

29 Distribution Way

Plattsburgh, New York, 12901

USA

Dart Aerospace Order Number: 17976

Part Number: D2273

Quantity: 4

Drawing Number: D2273, DT8020

Serial Number (s): 0041, 0042, 0043, 0044

Date: October 26, 2012

Non-Conformances: None

This is to certify that the parts identified above conform to all applicable drawings and/or specifications as evidenced by reports on file, and that all other purchase order and quality requirements have been met.

A handwritten signature in black ink, appearing to read 'Jerry Reyell', written over a horizontal line.

Jerry Reyell

Project Manager

Solve Composites

Eric Downing

From: Alisa Langille <alangille@solvecomposites.com>
Sent: Monday, November 12, 2012 11:25 AM
To: 'Eric Downing'; 'Jerry Reyell'
Cc: 'Isam El-Kassis'; psmith@dartaero.com; 'L Lacelle'
Subject: RE: PO17976 rear lockers

Eric
I am surprised that the lockers were not acceptable as I was informed by my team that they were the best we had sent. I will share the pictures with them and assure that this will not happen with any future delivery.

Regards
Alisa

From: Eric Downing [<mailto:edowning@dartaero.com>]
Sent: Monday, November 12, 2012 11:00 AM
To: Jerry Reyell; 'Alisa Langille'
Cc: Isam El-Kassis; psmith@dartaero.com; 'L Lacelle'
Subject: PO17976 rear lockers

Good morning Jerry & Alisa

Hope all is good. I came in this morning and started to inspect the latest rear lockers that was received in here at Dart on the 1st of November and found the outside finish is way too rough and the primer is flaking off. I have attached pictures of the problems.

To me the primer flaking off would be the results that the rear lockers were not scuffed enough for the primer to correctly adhere to the rear lockers. Also the outside finish is way too rough to pass. I think again your team will have to sand/buff the outside before applying the primer will solve the issue of the roughness as well.

I think that the rework can be done here at Dart so there is no need to return the rear lockers but I hope that this little issue can be rectified at your end and if there are any questions please call and we can figure out the solution.

Thanks

Eric Downing
QC Corrdinator



T: 1-613-632-5200 ext 223
F: 1-613-632-5246
Edowning@Dartaero.com

